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To: Commissioner for Patents Fax: 571-273-8300
Address: P.O. Box 1450, Alexandria, VA 22313-1450 Date: 5/5/2006
From: Stephen G. Sullivan Pages: 2

In Re Application of: Date: May 5, 2006
Barney K. HUANG Confirmation No.: 3166
Serial No.: 10/623,365 Group Art Unit: 3671
Filed: July 21, 2003 Examiner: CJ NOVOSAD
For: METHOD AND SYSTEM FOR MANAGING SKILLS ASSESSMENT

Transmitted herewith are the following:

- ☒ Transmittal Form (1 page Fax cover sheet)
- ☒ Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address (1 page)

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Stephen G. Sullivan, Reg. No. 38329

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PTO/SB/82 (04-05)

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**REVOCATION OF POWER OF ATTORNEY
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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/823,365
Filing Date	7/21/2003
First Named Inventor	HUANG, Barney Kuoyen
Art Unit	3671
Examiner Name	NOVOSAD, Christopher J.
Attorney Docket Number	BL001

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: **57780**☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
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I am the:

☒ Legal Representative of Deceased Applicant/Inventor (Heir).☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant's Legal Representative (Heir)**

Signature

Name

LUCAS HUANG

Date

2/10/2006

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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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